



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN

204170

DHSS STATE

DATE OF INSPECTION

5/29/09

LOCATION OF INSTRUMENT (STREET AND CITY)

HARRISON COUNTY LAW ENFORCEMENT CENTER

TIME OF INSPECTION

1047

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER 50 °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS

☒ TIME AND DATE

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2 °C) 34.1 °C

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 .099

TEST 2 .100

TEST 3 .101

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS 0

(0-.04) 0

(.05-.09) 0

(.10-.14) 2

(.15-.19) 2

(Over .19) 0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

OPERATING WITHIN MODHSS STANDARDS

GUTH LABORATORIES INC .10% SOLUTION LOT# 08340 BOTTLE #1285

MFG DATE: 10/15/2008 EXP DATE 10/15/09

INSPECTING OFFICER

SIGNATURE

Justin S. Johnson

PRINT NAME

JUSTIN S. JOHNSON

TYPE II PERMIT NUMBER/EXPIRATION DATE

920109

5/11/11

TELEPHONE NUMBER

(816) 387-2345



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



JUSTIN S JOHNSON

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 05/11/09
Number 920109
Expires 05/11/2011

John J Mathewson

Director of State Public Health Laboratory

Margaret T. Donnelly

Director, Department of Health

BAC DataMaster
Evidence TicketMISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204170

05/29/09

10:47

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

HEATERS
SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

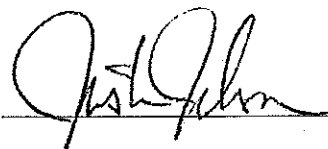
QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGH
IJKLMNOPQRSTUVWXYZ[\]^_`abcdefg hijklmno
pqrstuvwxyz () * +

Operator Signature



BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204170
05/29/09

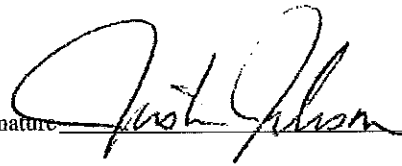
TESTING OFFICER:
JOHNSON/J/S
OFFICER I.D.: 513
PERMIT NUMBER: 920109
EXPIRATION DATE: 05/11/11
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	10:56
INTERNAL STANDARD	VERIFIED	10:56
EXTERNAL STANDARD	.099	10:56
BLANK TEST	.000	10:57
EXTERNAL STANDARD	.100	10:57
BLANK TEST	.000	10:58
EXTERNAL STANDARD	.101	10:58
BLANK TEST	.000	10:59

N = 3
SIM. = .1
AVG. = .1

Operator Signature



BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204170
05/29/09

ARREST TIME: 10:00
SUBJECT NAME:
DOE/JOHN
DOB: 01/01/80 SEX: M
STATE/D.L.: MO/123456
ARRESTING OFFICER:
JOHNSON/JUSTIN/S
OFFICER I.D.: 513
TESTING OFFICER:
JOHNSON/JUSTIN/S
OFFICER I.D.: 513
PERMIT NUMBER: 920109
EXPIRATION DATE: 05/11/11
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	11:02
INTERNAL STANDARD	VERIFIED	11:02
RADIO INTERFERENCE		

Operator Signature

